

CORPORATE AND COMMUNITIES OVERVIEW AND SCRUTINY PANEL 29 SEPTEMBER 2023

PERFORMANCE OF COMMENTS, COMPLIMENTS AND COMPLAINTS

Summary

1. The Corporate and Communities Overview and Scrutiny Panel has requested an update on the performance of the representation procedures that Worcestershire County Council (the Council) follows for Children's Social Care, Adult Social Care and Corporate Services.
2. The Cabinet Member with Responsibility for Corporate Services and Communication and the Complaints Manager have been invited to the meeting in order to respond to any queries the Panel may have.

Background

3. The Panel has previously received a detailed report in September 2022, setting out the 3 different representation procedures that the Council follows for Children's Social Care, Adult Social Care and Corporate Services (which includes all other Council services). In addition to the 3 procedures, the Council is also subject to the complaints process of the Local Government & Social Care Ombudsman (LGO) service.

Annual Reports for Adult Social Care, Children's Social Care and Corporate Representations

4. The 2022/23 Annual Reports for Adult Social Care representations, Children's Social Care representations and Corporate Representations are available on the Council's website:
 - Adults Social Care Statutory Representations Procedure – Annual Report 2022-2023 (Report pending approval from People Directorate Leadership Team)
 - [Children's Social Care Statutory Representations Procedure - Annual Report 2022-2023](#)
 - [Corporate Representations Procedure - Annual Report 2022-2023](#)
5. The Annual Reports cover the period from 1 April 2022 to 31 March 2023 and provide information on the number and nature of all representations received and the outcomes. They also look at some of the issues raised by them and what changes have resulted.

6. Finally, they give a flavour of some of the compliments received over the 12-month period. The two social care reports are a statutory requirement, the corporate report is done by choice to give information to the public.

Comments

7. Fewer comments are received than complaints, but these can cover the wide range of services that the Council provides, from major infrastructure projects, Covid-19 policies and advice and household recycling centres. Comments are passed to the relevant directorates to respond to as appropriate.

Local Government and Social Care Ombudsman (LGSCO) Annual Review Letter for 2022/23

8. Each year every local authority receives a letter from the LGSCO which summarises complaints upheld, compliance with the Ombudsman's recommendations and how many cases the local authority had remedied before consideration by the Ombudsman. The LGSCO Annual Review Letter for 2022/23 was received on 22 July 2023, and is attached at Appendix 1. The LGSCO accepts that their published figures do not match the data collected by Local Authorities. The LGSCO does not have the capacity to provide further information about the data supplied, therefore the data collected by the Council will be used.
9. 55 complaints were submitted to the LGSCO-in 2022-2023, which represents 5.1% of the total number (1,082 complaints) submitted to the Council in 2022-23 and are split as follows:
 - 12 (4.2%) out of 283 complaints made related to Worcestershire Children First (WCF) Social Care.
 - 15 (6%) out of 250 complaints made related to Adult Social Care
 - 28 (5.1%) out of 549 complaints made related to Corporate Services which are split into the following categories:
 - 13 WCF Special Educational Needs and Disabilities (SEND)
 - 12 Economy and Infrastructure
 - 3 Commercial and Commissioning
10. There were 36 complaints determined by the LGSCO in the 2021-22 year. They covered WCF Social Care (12), Adult Social Care (10), Commercial and Change (1), Worcestershire Children First SEND (5) and Economy and Infrastructure (8).
11. Of the 26 determinations from the LGSCO on Corporate matters, 3 were closed after initial investigation as outside jurisdiction, 11 were closed after initial investigation with no further action, 3 were closed after initial investigation and deemed as premature, 1 was upheld with no further action required by the Council and 8 were upheld with maladministration and injustice. In terms of payments as a result of findings, WCF SEND paid a total of £25,902 to 8 complainants.

12. Of the 16 determinations from the LGSCO relating to Adult Social Care, 4 were upheld as maladministration with injustice, 1 was upheld with no further action, 5 were closed after initial inquiries with no further action, 4 were closed after initial inquiries as out of jurisdiction, 1 was closed as premature, with no further action and 1 Public Report was issued as maladministration and injustice. In terms of payments as a result of findings, the Directorate of People (PD) paid a total of £5,600 to 4 complainants.
13. Of the 9 Children's Social Care complaints determined by LGSCO, 2 were closed after initial inquiries: out of jurisdiction, 5 were closed after initial inquiries: no further action, 1 was upheld maladministration and injustice and 1 was deemed as premature. In terms of payments as a result of findings, 2 complainants were paid a total of £1,000.
14. The Annual Review letter sets out that 92% of complaints about the Council investigated by the LGSCO were upheld, compared to an average of 80% in similar organisations. This was based on 24 investigations. This is a deterioration on 2021/22 when 63% of the 19 investigations conducted by the Ombudsman were upheld, as more complaints were investigated but the percentage upheld has increased. Compliance with the LGSCO's recommendations remains the same as the previous year at 100% and this is based on 19 outcomes for the 2022/23 year compared to only 12 the year before. Finally, in none of upheld cases, the Council had provided a satisfactory remedy before the complaint reached the Ombudsman. This is compared to an average of 6% in similar organisations and is based on 22 upheld decisions. This shows deterioration on the previous year when our percentage was 17% and based on 19 cases.
15. The LGSCO noted that out of the upheld complaints, the remedies for 4 were late and has asked the Council to improve this, noting that this is the fourth consecutive year where they have asked for late compliance with their recommendations to be addressed.
16. The LGSCO's comment on the Council's performance was as follows:

During the year, we issued [one public report](#) about your Council after it took five months to complete a social care assessment and care and support plan and failed to agree the complainant's request for a direct payment, even though they met the conditions to have one.

We recommended the Council apologise and make a payment of £3,000 to reflect the impact of the lack of care and support caused by the delay. We also asked the Council to update us on its progress to provide a direct payment and to identify and review other cases that may have been similarly affected. The Council identified two cases where there had been a delay and we were satisfied with the Council's assessment that those people did not suffer an injustice.

This year your Council agreed to, and implemented, the recommendations we made in 19 cases.

However, it is disappointing that in more than a fifth of these cases, the remedy was not completed within the agreed timescale. Delay completing agreed recommendations undermines confidence in the Council and the complaints process itself. The Council has the opportunity to consider our recommendations and the proposed timescales when we issue a draft of our

decision. It is at this stage you should consider the timescales and tell us if more time will be needed to complete the recommended actions.

Concerningly, this is the fourth consecutive year we have reported your Council's late compliance with our recommendations, which we have asked you to address each year. I ask that you contact my office to arrange a meeting with my officers to discuss what steps the Council can take to improve and any support we can offer you to do so.

Improvements to Managing LGSCO Complaints

17. To help address the issues raised in the 2022/23 letter from the LGSCO the Council is making immediate improvements to ensure that there is greater visibility of these complaints and their progress at a senior level. This includes notifying the Head of IT Customer Service, Assistant Director for IT & Digital, Assistant Director for Legal & Governance and the relevant Assistant Director for the service in relation to the complaint.
18. In addition there will be automated notifications sent to the Senior Officers detailed in paragraph 17 from the new Representations Management System as well as escalations to Director for Commercial and Change and the Chief Executive when 75% of the deadline for completing the requested remedies has been exceeded.
19. A meeting has also been held with the LGSCO and the Chief Executive, Strategic Director of Commercial and Change, Head of IT Customer Services, Customer Services and Representations Manager and Consumer Relations Officer to discuss the current position.
20. This was an extremely positive meeting where the LGSCO was reassured to hear about the changes the Council has made and is continuing to make. During the meeting it was agreed to set up quarterly meetings with their External Training & Relationship Lead to help facilitate any further learning and improvements. The Council is also establishing some additional training from the LGSCO for service area staff in the handling of complaints.

Performance

21. The performance figures provided are for the outcomes and response timescales for the complaints that were resolved between 1 April 2022 to 31 March 2023.

Children Social Care Complaints, Compliments & Comments

22. The Number of Complaints received is:

Children Services Complaints	2021/22	2022/23
Local / Stage 1 Complaints	213	283
Formal / Stage 2 Complaints	25	39
Review Panels / Stage 3's held	6	12
Local Government and Social Care Ombudsman	11	11
Total	255	345

23. It should be noted that-complaints that go through more than 1 stage of the procedure are only counted once in the following categories, although they may cover more than one service.

Children Services Team	2021/22	2022/23
Family Front Door	51	63
Adoption (now ACE ¹)	0	6
Children with Disabilities	15	24
Fostering & Kinship	8	4
Safeguarding Teams	89	97
Safeguarding and Quality Assurance	0	9
Support Services (including Supervised Contact)	1	0
Targeted Early Help / Targeted Family Support	9	20
Through Care	40	60
Total	213	283

Nature of Complaints

24. It should be noted that the-number of complaints is higher than previous year due to the change of recording practice. The Consumer Relations Team is now also recording each individual complaint point, in line with WCF hence the heightened figure. The same applies to the outcomes in table 9.3.

Nature of Complaints	2021/22	2022/23
General lack of Communication	88	226
Staff Attitude / Behaviour	91	157
Decision Making	85	198
Discrimination	4	0
Lack or delay in providing assessed service	16	363
Quality and Timeliness of social worker assessment	56	46
Practice Non-Compliant	21	71
Total	361	1061

Stage 1 Outcomes & Timescales

Stage 1 Outcomes	2021/22	2022/23
Upheld	15	25
Partially Upheld	57	50
Not Upheld	96	126
No finding	7	1
Discontinued / Withdrawn	13	41
Redirected	0	5
Total	188	248

Timescales of Stage 1 Complaint Resolutions	2021/22	2022/23
Within 20 working days	97.5%	97.5%

¹ ACE is a regional adoption agency

Within 40 working days	2%	2.5%
After 40 working days	0.5%	0%

25. Overall, 97.5% of all stage 1 Complaints have been dealt with in the required timescales, this is the same figure as last year despite a 33% increase in complaints received. Those over 20 working days do not go over an additional 5 days, the reason for this will be due to the complexity of the case issue or they require interviews with specific people who were not available in the initial 20 day period.
26. Complaints may be suspended when further information is required from the complainant or when court proceedings are underway.

Stage 2 Outcomes & Timescales

Stage 2 Outcomes	2021/2022	2022/23
Complaint Fully Upheld	2	5
Complaint Partially Upheld	12	8
Complaint Not Upheld	12	22
Discontinued	1	1
Total	27	36

Timescales of Stage 2 Complaint Resolutions	2021/22	2022/23
Within 25 working days	0%	0%
Within 65 working days	70%	83%
More than 65 working days	30%	17%

27. The target for stage 2's complaints within 65 working days is 90%. Although this has not been reached, there have been significant improvements over the past 3 years. In 20/21, only 17% of stage 2 complaints were completed within the 65 working days. This increased to 70% in year 21/22, and up to 83% this year.
28. Further development is needed in this area and continues to be a focus.

Compliments

Service Area	2021/2022	2022/2023
Children with Disabilities	4	1
Fostering & Kinship	2	2
QA and Independent Review	11	10
Safeguarding Area	33	49
Family Front Door	15	11
Supporting Families First/Targeted Early Help	10	6
Through Care	6	12
Child Protection Chairs and Local Authority Designated Officer	1	0
Care Leaver and Outreach	0	1
Other	0	2
Total	82	94

Adult Social Care Complaints, Compliments & Comments

29. The Numbers of complaints received is:

Level	2021/22	2022/23
Low Risk	190	203
Moderate /High Risk	43	47
Informal	14	14
Local Government & Social Care Ombudsman	13	15
Total	260	279

Number of Complaints by Service Area

Service Area	2021/22	2022/23
Central Services	57	61
Commissioning	7	3
Mental Health	19	22
Learning Disabilities	17	17
Area Social Work Teams	78	79
Provider Services	74	78
Safeguarding, Deprivation of Liberty & Prisons	17	15
Urgent Care	12	11
Young Adults Team	6	0
Total	287	286

Number of Complaints by Service

Service	2021/22	2022/23
Brokerage Process	1	1
Continuing Health Care	2	2
Complaint Process not followed	1	0
Contracted out (Day Care)	2	2
Decision Making	34	68
Discrimination	1	0
Duty, Care and Support Planning	39	37
Financial Assessment/Direct Payment	25	25
Finance	22	33
Externally Commissioned Home Care	29	29
Externally Commissioned Respite	1	0
Externally Commissioned Res/Nursing	4	11
Lack of Service	0	2
Supported Living	2	2
Other	1	4
Learning Disability	2	1
Mental Capacity Assessment	4	1
Process	0	5
Promoting Independence	14	3
Safeguarding Processes	5	10
Staff Attitude/Behaviour	11	11
Standard of Service	176	145

Total	376	392
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Nature of Complaints

Nature of Complaint	2021/22	2022/23
Adult Safeguarding	2	3
Breach of Confidentiality	5	3
Care Plan Assessment	1	0
Changes to call Times	2	1
Continuing Health Care	1	0
Decision Making	0	3
Delay in Providing Service	2	6
Delay/Failure to Keep Informed	1	1
Direct Payments	8	8
Discrimination	1	0
Deprivation of Liberty	0	2
Deferred Payment Agreement Process	0	1
Financial	14	2
General lack of Communication	35	38
Health/Personal Care	0	1
Hospital Discharge	0	2
Inaccurate Information	2	8
Info from Provider	1	1
Lack of or delay in providing assessment	1	0
Lack of Service	5	3
Late Calls	0	1
Medication	2	1
Mental Capacity Assessment	3	0
Missed Calls	0	1
No return of telephone calls	6	12
Other	1	1
Outcome of Decision/Assessment	5	1
Practice non-compliant with leg/process	2	0
Process dec/Res Alloc	4	3
Provider Management Admin	0	1
Purchase Services	0	1
Staff Attitude/Behaviour	16	7
Staff/Training/Qualifications	1	0
Standard of Service Delivery	176	216
Support Planning	4	4
Unavailability of Staff to take calls	0	1
Total	301	333

Outcomes of Complaints

30. Low Risk complaints are relatively straight forward and relate to a single or a few issues that can be readily resolved. Some complaints were redirected, such as to other partner organisations or to the provider's own complaints process.

Outcomes of Low Risk Complaints	2021/22	2022/23
Upheld	26	19

Partially Upheld	30	24
Not Upheld	45	39
Re-directed	3	2
Discontinued (includes referred to Safeguarding)	62	17
Withdrawn	6	0
Total	172	101

31. Moderate Risk complaints are generally those that deal with a number of issues, or a number of teams and cross organisational issues. These are either dealt with by a relevant Social Care manager or Advanced Social Work Practitioner or the Investigating Officer for Adult Social Care.

Moderate / High Risk Complaints Outcomes	2021/22	2022/23
Upheld	3	0
Partially Upheld	8	11
Not Upheld	4	7
Discontinued	17	5
Redirected	2	2
Withdrawn	2	0
Total	36	25

Timescales

32. There are no prescribed time limits for dealing with complaints, although the legislation suggests a maximum of 6 months. The expectation is that reasonable timescales are negotiated and agreed with the complainant. Adult Social Care have set default time limits of 35 working days for the completion of complaints, although it is possible that such timescales are extended for more complex complaints.

Timescales of Low-Risk Complaint Resolution	2021/22	2022/23
Over 65 Days	9%	25%
Within 55 Days	5%	3%
Within 45 Days	8%	8%
Within 35 Days	78%	64%

Timescales of Moderate/High Risk Complaint Resolution	2021/22	2022/23
Over 65 Days	28%	28%
Within 55 Days	3%	8%
Within 45 Days	11%	16%
Within 35 Days	58%	48%

Compliments

Compliments	2021/22	2022/23
Central Services	10	10
Commissioning	1	1
Mental Health & Learning Disabilities	39	40
Operations & Intergration	68	97
Provider Services	92	63

Quality, Safeguarding, Deprivation of Liberty & Prisons	3	5
Urgent Care	9	21
Total	222	237

Corporate Complaints, Compliments & Comments

Number of Complaints by Directorate

Directorate	2021/22	2022/23
Economy & Infrastructure (E&I)	334	353
Chief Executive Unit (CEU)	5	14
Worcestershire Children First (WCF)	58	140
People	32	38
COaCH	23	31
Public Health	8	0
Total	460	576

Number of Complaints by Service Area

Economy and Infrastructure	2021/22	2022/23
Transport Operations	111	11
Strategic Planning	1	0
Strategic Infrastructure & Economy	19	23
Planning Development Control	3	10
Network Control	1	15
Highways Transport Operations	0	101
Highways & Right of Way Operations	10	7
Highways Maintenance Operations – Routine & Cyclic	144	166
Highways Maintenance Operations – Design & Build	2	0
Flood Risk & Highways Drainage	3	3
Economy, Major Projects & Waste	40	17
Total	334	353

Worcestershire Children First	2021/22	2022/23
Through Care	1	0
Sufficiency & Place Planning	3	0
SEND & Vulnerable Learners	53	123
Operational Safeguarding	1	0
North East	0	1
Management Information	2	0
Fostering	1	1
Children with Disabilities (CWD), Short Breaks & Residential Care	1	2
Business Systems	1	0
Early Help Partnership	0	1
Assessment Teams	0	7
Child Protection & Local Authority Designated Officer (LADO)	0	2

Adoption Services	0	3
Total	63	140

People Directorate	2021/22	2022/23
Worcestershire Safeguarding Adults Board (WSAB)	1	0
Vulnerable Resettlement Programme	0	2
Safeguarding	0	1
Road Safety Education & Skills	1	0
Registrars	9	6
Older People/Physical Disabilities (OP/OD)	2	3
Learning Disability – North	1	0
Mental Health – South	1	0
Gypsy Sites	1	1
Deprivation Of Liberty Safeguarding (DoLS)	0	1
Delivery Lead & The Hive	10	11
Countryside Sites South	0	1
Countryside Sites North	1	4
Community Greenspace	1	0
Care Contributions Assessment Team (CCA)	2	0
Commissioning	0	4
Area Team Wyre Forest	0	1
Area Team Redditch	0	2
Area Team Malvern Hills	2	0
Adult Contact Team/Here2Help	0	1
Total	32	38

Commerical and Change	2021/22	2022/23
Web Manager	1	0
Technology	1	0
Legal & Democratic	2	2
Contact Centre	4	10
Consumer Relations	9	7
Commercial & Change	7	9
Corporate Information Governance Team (CIGT)	0	3
Total	25	31

Public Health	2021/22	2022/23
Public Health Consultants	8	0
Total	8	0

Chief Executive Unit	2021/22	2022/23
Human Resources, Organisational Development & Engagement	0	2
Finance	5	6
Corporate Legal Services	0	1
Content & Communications	0	3
Accountancy & Treasury	0	2
Total	5	14

Nature of Complaints

33. As in previous years, many of the complaints fall under the more general headings of Communication, Decision making and Standard of Service. The most noticeable change is the increase in complaints relating to Standard of Service. This appears to be due to increased demand in certain areas including Special Needs Education and School Transport.

Nature of Complaint	2021/22	2022/23
Transport	2	2
Standard of Service	159	301
Staff Attitude / Behaviour	38	45
Requests	22	49
Race	2	2
Publications	1	0
Policy Decision/Resource Allocation	0	1
Other Service Users	1	0
Miscellaneous	10	6
Lack of Service	55	21
Information Communication Technology (ICT)	6	0
Gender	0	1
Freedom of Information Request	17	32
Facilities	0	1
Disability	1	2
Decision Making	110	108
Damage to property or persons	10	14
Contractors	21	7
Communication	80	89
Total	535	681

Stage 1 Outcomes

Stage 1 Outcomes	2021/22	2022/23
Upheld	64	97
Partially Upheld	131	172
Not Upheld	139	147
Discontinued	19	40
Withdrawn	4	7
Redirected	47	26
Total	404	489

Stage 2 Outcomes

Stage 1 Outcomes	2021/22	2022/23
Upheld	3	11
Partially Upheld	9	11
Not Upheld	14	14
Discontinued	0	1
Total	26	37

Timescales

34. For Stage 1 Complaints, the majority (82.80%) were responded to within the 20-day target. The average response time for all Stage 1 responses was 13.37 days. This is a slight improvement compared to the 2021-22 average which was 15 days.

Timescales of Stage 1 Complaint Resolution	2021/22	2022/23
Within 20 Days	73.13%	82.80%
After 20 Days	26.87%	17.20%

35. For Stage 2 Complaints, 89.80% were responded to inside the 25 working day target. The average response time for all Stage 2 responses was 18.83 days.

Timescales of Stage 2 Complaint Resolution	2021/22	2022/23
Within 25 Days	83.33%	89.80%
After 25 Days	16.67%	10.20%

Key Performance Indicators (KPIs)

2022 to 2023 KPI Performance

Green – Target met or exceeded.

Amber – Within 10% of meeting target.

Red – Outside 10% of meeting target.

KPI	Target	2021/22	2022/23
Children’s Social Care Stage 1 complaints completed in timescale (within 20 days)	90%	97.50%	97.50%
Children’s Social Care Stage 2 complaints completed in 65 days	90%	70.00%	83.00%
Adult Social Care complaints completed in timescale (within 6 months)	100%	98.72%	96.04%
Corporate Stage 1 complaints completed in timescale (within 20 days)	90%	73.13%	82.80%
Corporate Stage 2 complaints completed in timescale (within 25 days)	90%	83.33%	89.80%
E&I Stage 1 complaints completed in timescale (within 20 days)	90%	78.90%	81.00%
E&I Stage 2 complaints completed in timescale (within 25 days)	90%	83.33%	100.00%
Adult Social Care complaints that progress to the Local Government and Social Care Ombudsman	25%	4.45%	6.00%
Corporate complaints that progress from Stage 1 to Stage 2	25%	1.70%	0.72%
Children’s Social Care complaints that progress from Stage 1 to Stage 2	25%	11.75%	13.75%

Consumer Relations Team Commentary on KPI Performance

36. Children's Social Care Stage 2 complaints completed in 65 days:
 - Although there has been significant improvements in this area, further development is needed. There will be a focus on responding to stage 2 complaints within 25 working days, although it is appreciated that this is a tight timescale. The increase in Investigating Officers and the continued collaboration between Consumer Relations and WCF will be key to achieving this goal.
37. Adult Social Care complaints completed in timescale (within 6 months):
 - This target was narrowly missed due to an external Investigating Officer who had to discontinue with their investigation which was 80% completed. It was necessary to commission a new Investigating Officer which resulted in the complaint timescale being exceeded.
38. Corporate Stage 1 complaints (inc E&I) completed in timescale (within 20 days):
 - Whilst there has been an improvement in performance year on year, the high volumes of complaints received in a short period of time regarding the Copcut Junction and School Transport have impacted the overall figure.
39. Corporate Stage 2 complaints (Inc E&I) completed in timescale (within 25 days):
 - Again, an improvement on previous year. A small number of complex investigations were outside timescale. This was mainly due to the time required to complete interviews and gather required information.
40. E&I Stage 1 complaints completed in timescale (within 20 days):
 - High volumes of complaints received in a short period of time regarding the Copcut Junction and School Transport have impacted performance.

Learning from Complaints

41. When a complaint is upheld (and the Council is at fault) and the findings of a subsequent investigation is for a change to policy or service delivery, the Consumer Relations Unit will produce an action plan report and follow up with the Service any learning/action that needs to be carried out. Recommendations within these reports are agreed with the appropriate Assistant Director and shared with the relevant Director.
42. Learning from complaints is an important aspect of the Complaints procedure. Examples from 2022/23 include:
43. Worcestershire Children's First
 - WCF have updated their Supervision Recording Template to include a specific recording section to evidence reflective discussion from learning from complaints, audits, and feedback.
 - All Complaint Outcomes are shared with the relevant manager and group manager to ensure they are cited on learning, and this can be discussed with individual practitioners.
 - Developed a learning/case scenario document that has been shared with all Social Care Teams for a learning/reflective session in all Team Meetings –

based on complaints received from children, young people, and care leavers.

44. Adults Social Care

- In house provider managers addressed issues with their front-line staff. A communication strategy was agreed with a new provider and the Council's Quality Assurance Team works with the Provider through developing and monitoring the action plan is in place.
- Additional training for staff that monitor alerts to ensure they are actioning anything straight away is in place. Possibility of a report being generated to the management team to ensure that there is good oversight of this is being explored.
- Reviewed the information pack that is left with people to ensure that it includes information regarding Council processes and the levels of service that can be expected. This is also shared with partners in Worcestershire Acute Hospitals NHS Trust in order that there is wider learning.

45. Corporate (SEND)

- Staff have been asked to log into meetings 10 mins in advance in case of technical difficulties and check the format the day before (e.g. confirm if face-to-face or virtual).
- Staff have been asked to request additional information immediately if a mainstream parental preference states they cannot meet need and does not state what additional support would be required
- Staff have been asked to inform parents if their mainstream parental preference responds negatively, to outline the additional support needed by mainstream to meet need and consider holding an early Annual Review to assess if this support was successful if it is decided the child should attend there. If progress has not been made, specialist provision could then be revisited.
- Staff have been asked to ensure that letters being sent to service users are explanatory and contain all the information required for the service user to respond easily. There has been work undertaken previously relating to this and at the current time WCF are working with a number of parent/carers to ensure continued improvements are made.
- The SEND Service are in the process of transferring to a new case management system, with the go live date scheduled for January 2023. Work is being undertaken in this area to ensure that there is clear guidance and practice standards in place for all staff within the service.
- Staff have been reminded to respond to enquiries within 5 working days and agree a date to respond fully.
- The SEND Service are making ongoing improvements in the Annual Review process and as part of this are developing a tracker to monitor Annual Reviews and ensure they take place on time.

Complaint Training

46. Consumer Relations Officers provide training sessions for staff on the operation of the 3 different complaints procedures, as and when required. So far in the

current year 7 sessions have been provided for staff in the People Directorate (18 attendees). This is in addition to the guidance available on the staff intranet.

Vexatious Complainant Procedure

47. There are procedures for dealing with vexatious complainants and they are set out in the legislation for the Adult and Children's representations procedures. A similar procedure has been adopted for Corporate Complaints. It is a serious measure to take, and the criteria must be evidenced and met to instigate it.
48. The Team manage this process, in conjunction with senior managers of the affected service. However, identifying someone as vexatious does not mean that the Council can refuse to take new complaints from them or to communicate with them on some level. The team give advice to managers on how to handle difficult or persistent complainants before reaching the question of using the vexatious process. So far this year, no complainant has been registered as vexatious.

Independent Investigating Officers and Independent Persons

49. The Children's Act 1989, subsequent legislation and guidance determine the Children's Social Care procedure in place in the Council. At Stage 1, WCF staff carry out the investigation and respond to the complainant direct, as the requirement is to deal with matters as close to the point of service delivery as possible. They have 10 working days to do so, extendable to 20 working days if necessary.
50. At Stage 2, the appointment of an Independent Person (IP) is required, together with an Investigating Officer (IO). Whilst an IO can be an employee of the authority, they cannot be from the service complained about. In the past, the Consumer Relations Officer for Children's Services did conduct some investigations themselves, whilst also using IOs from the pool, but workloads are now such that they are rarely able to do so, particularly given the tight timescale of 25 - 65 working days. Most local authorities use external IOs.
51. The roles of the IO and IP are set out in the guidance. The IO must be impartial and open-minded, and their investigation based on an analysis of information and interviews. Their conclusions must be evidenced and reasonable based on the balance of probability. An IP is involved at all stages of the investigation and cannot be an elected member, employee, former employee or spouse of a former employee (if less than 3 years has passed). Their role is to ensure the investigation is open, transparent and fair (particularly with regard to the young person concerned). If the complaint progresses to Stage 3 both the IO and IP are required to attend the Review Panel and speak to their reports.
52. IOs are also used for Moderate and High-Risk Adult Social Care complaints and Stage 2 Corporate complaints where the Consumer Relations Officers are unable to undertake the investigations themselves.

Representation Management System

53. A new Representation Management System (RMS) is being implemented in October 2023 which is a bespoke digital system, with integrated online forms and dashboards for the Consumer Relations Team, Service Areas and Independent

Investigators. Representations will follow an automated workflow between stages, and automatic reminders will be triggered in advance of the deadlines for responses. The new RMS system will deliver a range of benefits as outlined below:

- Improved and integrated customer centric online form ensuring more information is captured at the point of submission and assessments of representations can be made more quickly.
- Service Area staff can directly submit representations into the RMS via a staff facing form.
- Increased efficiency and productivity for the Consumer Relations Team through the avoidance of double handling information / data which needs to be entered into the system.
- Use of pre-defined email templates for communication with the complainant.
- Avoidance of using emails and spreadsheets to track the progress of complaints with service areas.
- Increased efficiency and productivity for services areas through direct access to the system, streamlining the process for investigating and providing responses to complaints.
- Complaints that progress to stage 2 or 3 will be automatically linked back to the original complaint to ensure continuity.
- Automatic reminders and SLA count downs will help ensure targets for initial acknowledgments of complaints and responses within the statutory timescales are achieved.
- Improved reporting capability through the direct integration into Power Bi, reducing the demand on the team to extract data and provide reports to the business.

Monitoring Information

54. The Council does not currently collect any demographic information to support data analysis or capturing evidence of any groups being disproportionately affected. The Council, being under the Public-Sector Equality Duty must, on an on- going basis, consider how its policies are working for the diverse communities the Council serves.

Relevant Legislation

55. Children and Family Services - The Children Act 1989, Representations Procedure (England) Regulations 2006. The Local Authority functions covered include services provided under Parts III, IV and V of the Children Act 1989.
56. Adult Social Care – The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, which came into force on 1 April 2009.
57. Public Health - The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012.

Health and Wellbeing Implications

58. The complaints element of the social care and corporate procedure is part of a wider assurance process supporting quality in service delivery standards. This can then be a positive experience for customers and contribute to their health and well-being. For those occasions where the experience which has led to a complaint is a less positive one, then there is an opportunity for appropriate action or redress so that the health and well-being of the complainant and/or relevant others is secured. The compliments process allows customers to note great practice by the Council; positive experience of officers working in many different settings will support improved experience of health and well-being for individuals as well as for staff who can be satisfied that their work is appreciated.

Purpose of the Meeting

59. The Corporate and Communities Overview and Scrutiny Panel is asked to:

- consider the information provided in the report
- decide whether any further Scrutiny is required; and
- agree any comments to highlight to the Cabinet Member with Responsibility for Corporate Services and Communication.

Supporting Information

Appendix 1: Local Government and Social Care Ombudsman (LGSCO) Annual Review Letter for 2022/23

Appendix 2: Examples of compliments received during 2022/23

Contact Points

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Background Papers

In the opinion of the proper officer, in this case the Assistant Director for Legal and Governance the following are the background papers relating to the subject matter of this report:

- Agenda and Minutes of the Corporate and Communities Overview and Scrutiny Panel on 21 September 2022, 8 November, 20 July and 11 March 2021.

[All agendas and minutes are available on the Council's website here.](#)